

CONSUMER LOAN APPLICATION

Credit Requested Is: <input type="checkbox"/> Home Equity Loan <input type="checkbox"/> Collateral Secured Loan <input type="checkbox"/> Personal Unsecured Loan		Account Requested: <input type="checkbox"/> Individual <input type="checkbox"/> Joint
Amount Requested \$	Description of Collateral Offered	We intend to apply for joint credit Initial _____ Co-Applicant _____
Purpose of Credit Request		Applicant _____ Co-Applicant _____

If the Applicant is married, he or she may apply for individual credit. For Marital Status, check one if a) you are applying for a secured credit; b) you reside in a community property state; or c) you are relying on property in a community property state as a basis for repayment of the credit requested.

Applicant	APPLICANT INFORMATION	Co-Applicant		
Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor		Applicant Role: <input type="checkbox"/> Borrower <input type="checkbox"/> Co-Signer <input type="checkbox"/> Guarantor		
Applicant Name (include Jr. or Sr. if applicable)		Co-Applicant Name (include Jr. or Sr. if applicable)		
Social Security Number	Home Phone (incl. area code)	DOB (mm-dd-yyyy)	Social Security Number	
Home Phone (incl. area code)		DOB (mm-dd-yyyy)	Home Phone (incl. area code)	
DOB (mm-dd-yyyy)		DOB (mm-dd-yyyy)		
Email Address		Email Address		
<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)		<input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (include single, divorced, widowed)		
Dependents (not listed by Co-Applicant)		Dependents (not listed by Applicant)		
no. ages		no. ages		
Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien		Citizenship: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident Alien <input type="checkbox"/> Non-Resident Alien		
Present Address (street, city, state, ZIP) since		Present Address (street, city, state, ZIP) since		
Mailing Address, if different from Present Address		Mailing Address, if different from Present Address		
If residing at present address for less than two years, complete the following:				
Former Address (street, city, state, ZIP) from to		Former Address (street, city, state, ZIP) from to		

Applicant	EMPLOYMENT / INCOME INFORMATION	Co-Applicant	
Name & Address of Employer <input type="checkbox"/> Self Employed		Name & Address of Employer <input type="checkbox"/> Self Employed	
Yrs. on this job		Yrs. on this job	
<input type="checkbox"/> Full time		<input type="checkbox"/> Full time	
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)
Gross Monthly Income \$		Gross Monthly Income \$	
Name & Address of Employer <input type="checkbox"/> Self Employed		Name & Address of Employer <input type="checkbox"/> Self Employed	
Dates from to		Dates from to	
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)
Name & Address of Employer <input type="checkbox"/> Self Employed		Name & Address of Employer <input type="checkbox"/> Self Employed	
Dates from to		Dates from to	
Position/Title & Type of Business	Business Phone (incl. area code)	Position/Title & Type of Business	Business Phone (incl. area code)

NOTICE: Alimony, Child Support or Separate Maintenance Income need not be revealed if you do not wish to have it considered as a basis for repaying this obligation.

Other Income	\$	Other Income	\$
Other Income	\$	Other Income	\$
Other Income	\$	Other Income	\$

HOUSING INFORMATION			
<input type="checkbox"/> Own <input type="checkbox"/> Rent since	Monthly Housing/Rent \$	Present Value \$	Date Purchased

CASH ASSET INFORMATION		
Financial Institution Name	Saving Account Balance \$	Checking Account Balance \$

I/We hereby apply for the loan or credit described in this application. I/We certify that I/we made no misrepresentations in this loan application or in any related documents, that all information is true and complete, and that I/we did not omit any important information. I/We agree that any property securing the loan or credit will not be used for any illegal or restricted purpose. Lender is authorized to verify with other parties and to make any investigation of my/our credit, either directly or through any agency employed by Lender for that purpose. Lender may disclose to any other interested parties information as to Lender's experiences or transactions with my/our account. I/We understand that Lender will retain this application and any other credit information Lender receives, even if no loan or credit is granted. These representations and authorizations extend not only to Lender, but also to any insurer of the loan and to any investor to whom Lender may sell all or any part of the loan. I/We further authorize Lender to provide to any such insurer or investor any information and documentation that they may request with respect to my/our application, credit or loan.

X _____ X _____
Applicant **Date** **Co-Applicant** **Date**

REFERENCES ADDENDUM TO CONSUMER LOAN APPLICATION

Applicant:

Application Number:

Applicant PERSONAL REFERENCES Co-Applicant

Applicant		PERSONAL REFERENCES		Co-Applicant	
Name	Relationship	Name	Relationship	Name	Relationship
Address	Phone	Address	Phone	Address	Phone
Name	Relationship	Name	Relationship	Name	Relationship
Address	Phone	Address	Phone	Address	Phone
Name	Relationship	Name	Relationship	Name	Relationship
Address	Phone	Address	Phone	Address	Phone

PURCHASE OF INSURANCE DISCLOSURE

Applicant:

Lender:

First Robinson Savings Bank, N.A.
First Vincennes Savings Bank
615 Kimmel Road
Vincennes, IN 47591

IMPORTANT

**DO NOT SIGN THIS FORM UNTIL YOU CAREFULLY
READ IT AND UNDERSTAND ITS CONTENT**

Purpose.

You are purchasing an insurance product or annuity from Lender in connection with your loan. Federal law requires Lender to provide you with the following disclosures.

Insurance Disclosures.

Not Guaranteed by the Bank or an Affiliate of the Bank.

The insurance product or annuity is not a deposit or other obligation of, or guaranteed by, the Bank or an affiliate of the Bank.

Not FDIC Insured.

The insurance product or annuity is not insured by the Federal Deposit Insurance Corporation (FDIC) or any other agency of the United States, the Bank, or an affiliate of the Bank.

Acknowledgment.

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ, RECEIVED AND UNDERSTAND THIS INSURANCE DISCLOSURE.

APPLICANT:

X

Applicant

Date

